

PROJECT CHARTER

GOAL 3: Establish seven Regional Health Collaboratives to support the integration of each patient-centered medical home (PCMH) with the broader Medical-Health Neighborhood.

Version 4.0 - DRAFT

Summary

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Key Participants	Idaho Department of Health and Welfare (IDHW), Idaho Health Collaborative (IHC), Regional Health Collaboratives (RCs), Public Health District (PHD) SHIR Staff, Population Health Workgroup, Briljent, Idaho Medical Home Collaborative (IMHC), and Behavioral Health Integration Workgroup.
IHC Charge	Support the integration of each PCMH with the local Medical-Health Neighborhood by creating the Regional Health Collaborative infrastructure. RCs will support practices in PCMH transformation and will link the PCMHs to the Medical-Health Neighborhood to facilitate coordinated patient care through the entire provider community.

Success	Measures				
Success Measures	SHIP Desired Outcomes	Measurement			
1.	Support for PCMHs.	Cumulative (CUM) # of RCs established and providing regional	AY R	Q4	
		quality improvement guidance and	1	-	
		working with PHDs to integrate the Medical Health Neighborhood. <i>Model</i>	2	7	
		Test Target one RC in each of the	3	7	
		seven health districts. Numerator: Count of PHDs that have	4	7	
		established RCs. Denominator: Count of PHDs			

Success Measures	SHIP Desired Outcomes	Measurement				
		statewide.				
2.	• Support for PCMHs.	CUM # of primary care practices selected for a SHIP cohort that can receive assistance through regional SHIP PHD team. <i>Model Test Target: 165.</i> Numerator: Primary care practices selected for a SHIP cohort that received communication about how to get assistance. Denominator: Count of practices that completed the application + Count of practices that achieved PCMH designation.	AY Q4 1 - 2 55 3 110 4 165		>	
3.	Increased coordination between PCMHs and the Medical-Health Neighborhood.	CUM # of primary care practices selected for a SHIP cohort who have established protocols for referrals and follow-up communications with service providers in their Medical-Health Neighbørhood. Model Test Target: 165 Numerator: Count of designated PCMHs that have signed an attestation of having established protocols. Denominator: Count of designated PCMHs.	AY R Q1 1 - 2 - 3 75 4 125	- - 85 140	25 100 155	- 55 110 165
4.	Coordinated patient care through the entire provider community.	CUM # of patients enrolled in a designated PCMH whose health needs are coordinated across their local Medical/Health Neighborhood,	AY Q1 R 1 -	Q2 -	Q3	Q4
	23	as needed. Model Test Target: 825,000 (50.5% of Idahoans).	2			275,000

Success Measures	SHIP Desired Outcomes	Measurement						
			3				550,000	
			4	825,000	825,000	825,000	825,000	

Planned Scope

Deliverable 1	Result, Product, or Service	Description	Owner	Impacted Parties
	Establish RCs.	 Contract with PHDs and 	• IDHW	Other RCs
		hire staff.	PHDs (led by SHIP	• IDHW
			Managers)	• PHDs
Est. Timeframe	Start : 06/01/2015			End: 04/2016
Milestones	Event			Target Date
	 Negotiate sub-grant. 			• 06/2015
	Execute contract with Ph	$\overline{}$		• 07/2015
	Hire SHIP staff (SHIP Ma	anager, Quality Improvement/Q	uality Assurance (QI/QA)	• 10/2015
	Specialist).			
	 Identify RC Advisory Gro 	up.		• 11/05/2015
	Convene RC Advisory G	roup.		• 11/2015
	 Identify RC Representation 	ve to the IHC.		• 11/2015
	 Establish RC membershi 	p.		• 04/2016
Deliverable 2	Result, Product, or Service	Description	Owner	Impacted Parties
	Develop and implement	Develop plan that	• RCs	• IHC
	RC Operational Plan and	describes how RCs will	 PHDs 	 IDHW PCMH Contractor
	process for updating the	operate and support	 IDHW 	 PCMHs
	plan	PCMHs.		• PHDs
Est. Timeframe	Start: 07/2015			End : 04/2016
Milestones	Event			Target Date
	 Define services provided 	by RCs.		• 07/2015
	Develop RC Operational			• 03/2016

	Implement RC Operational Plan.	• 03/2016
	RCs provide regional quality improvement and Medical-Health Neighborhood integration	00/20:0
	services.	Bato.
	IDHW develops and implements plan to monitor RCs to ensure RCs provide regional	• Date?
	quality improvement and Medical-Health Neighborhood integration services within	
	service level requirements.	
	Submit status report.	• 06/2016
Deliverable 3	Result, Product, or Service Description Owner	Impacted Parties
	Evaluation plan to ensure	• RCs
	RCs provide regional services from RCs to	• PCMHs
	quality improvement and PCMHs.	• PHDs
	Medical-Health	
	Neighborhood integration	
	services within service	
	level requirements.	
Est. Timeframe	Start: 11/2015	End: 04/2016
Milestones	Event	Target Date
	Develop plan.	• 01/2016
	Review/revise plan.	• 03/2016
	Finalize plan.	• 04/2016
	Implement plan.	• 04/2016
Deliverable 4	Result, Product, or Service Description Owner	Impacted Parties
	Communication from Communication to let RCs	 PCMH Contractor
	RCs to practices	 IDHW Staff
	regarding availability of can do for them.	• IMHC
	services.	• IHC
Est. Timeframe	Start: 11/2015	End: 01/31/2019
Milestones	Event	Target Date
	Develop communication.	• 12/2015
	Review/revise communication.	• 02/2016
	Finalize communication.	• 03/2016

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	Obtain list of designated PCMHs.	• 03/2016
	Initial communication with practices.	• 04/2016
	Ongoing communication with practices.	 Ongoing
Deliverable 5	Result, Product, or Service Description Owner	Impacted Parties
	 Established Medical- Health Neighborhoods. Information sharing across Medical-Health Neighborhoods for improved care coordination. 	PCMHsProviders
Est. Timeframe	Start: 7/2015	End: TBD
Milestones	Event	Target Date
	Define Medical-Health Neighborhoød.	• 11/2015
	Identify participants in the Medical-Health Neighborhood.	• 05/2016
	Submit list of participants to Department Project Manager.	• 06/2016
	Report to the IHC the status of establishing Medical-Health Neighborhoods.	 Ongoing (at least annually)
Deliverable 6	Result, Product, or Service Description Owner	Impacted Parties
	Sustainability Plan. TBD PHD	 Hospitals
	• RCs	• PCMHs
Est. Timeframe	Start: MM/DD/YYYY	End: MM/DD/YYYY
Milestones	Event	Target Date
	Begin the process of creating a Sustainability Plan.	• 06/2016
	Submit Sustainability Plan.	• 12/2018

Project Risks, Assumptions, and Dependencies

Risk Identification		Event	Likelihood	Seriousness		Potential Mitigation			
	1.	RCs are not established in order to provide quality improvement and integration services to PCMHs in each region.	L	H	•	Ongoing monitoring by IDHW SHIP Project Manager and PHD staff to determine each RC's capacity to support PCMHs. Effective communication pathways between IHC and RCs. Clear coordination with the PCMH Contractor. Clear guidance on expectations of RCs.			
	2.	Clinical and broader public/social health providers do not follow established protocols for referrals and follow-up communication.	M	M		Participation of Medical-Health Neighborhood participants in development process of communication protocols. Clear definition of Medical-Health Neighborhood and key participants. Consistent use of definition. Effective communication process for Medical-Health Neighborhood participants to raise concerns.			
	3.	Misaligned timelines and duplicative efforts among Briljent, IHDE, and Data Analytics Contractor.	M	M	•	Establish communication protocols for all contractors assisting with PCMH transformation, quality improvement, and data exchange efforts. Contractor timing should be aligned.			
Assumptions	•	Implementation plan (charter) will be required for each RC. Ongoing monitoring by Department Project Manager and PHD staff to determine RC capacity to support PCMHs. RCs will set criteria for referrals and follow-up communication for Medical-Health Neighborhood participants.							
Dependencies and Constraints	•	PHDs communicating effectively.							

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Project Reporting and Scope Changes

Changes to scope must be reflected at the Workgroup Charter level as approved by the IHC after review by SHIP team.

Version Information

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Final Acceptance

Name/Signature	Title	Date	Approved via Email	
Cynthia York	SHIP Administrator	12/18/2015		
Katie Falls	Mercer Lead	12/18/2015		

